



Street & Alley Closure Pre-Application

Louisville Metro Planning & Design Services

Case No.: _____ Intake Staff: _____

Date: _____ Fee: **\$ 100**

Pre-applications are due on Mondays at 2:00 p.m. in order to be processed that week. Once complete, please bring the pre-application and supporting documentation to: Planning and Design Services, 444 South 5th Street, Suite 300. For more information, call (502) 574-6230 or visit <http://www.louisvilleky.gov/PlanningDesign>.

Checklist:

- ☐ Land Development Report (Detailed instructions to obtain a Land Development Report are available online at: <http://www.louisvilleky.gov/PlanningDesign/IWantTo/Find+a+Zoning+District.htm>)
- ☐ Twelve copies of the plat (drawn to engineer's scale), including the following elements:
 - ☐ Title of the plat
 - ☐ Surveyor's name and address
 - ☐ Source of title, if applicable
 - ☐ Plan date
 - ☐ Revision date
 - ☐ North Arrow
 - ☐ Vicinity Map
 - ☐ Legend
 - ☐ Plat Scale
 - ☐ Street/alley names
 - ☐ Right of way, with widths shown
 - ☐ Net and gross acreage of site
 - ☐ Area proposed for permanent closure outlined in a heavy, solid line and cross-hatched to clearly identify the area
 - ☐ Property lines with bearings and distances
 - ☐ Location, ownership, mailing address, deed book & page of all adjacent property owners
 - ☐ Existing MSD Easements
 - ☐ Proposed MSD Easements
 - ☐ Land Surveyor's Certificate
- ☐ \$100 pre-application fee (cash, charge or check made payable to Louisville Metro Codes & Regulations)

Project Information:

Project Name: _____

Street/Alley Name: _____

Location of street/alley: _____

The street/alley contains _____ acres.

Has the property been the subject of a previous development proposal (e.g., rezoning, variance, appeal, conditional use permit, minor plat, etc.)? *This information can be found in the Land Development Report (Related Cases).* ☐ Yes ☐ No

If yes, please list the docket/case numbers:

Docket/Case #: _____ Docket/Case #: _____

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Contact Information:

Owner: ☐ *Check if primary contact*

Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: _____

Alternate Phone: _____

Email: _____

Owner Signature (required): _____

Applicant: ☐ *Check if primary contact*

Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: _____

Alternate Phone: _____

Email: _____

Attorney: ☐ *Check if primary contact*

Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: _____

Alternate Phone: _____

Email: _____

Plan prepared by: ☐ *Check if primary contact*

Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: _____

Alternate Phone: _____

Email: _____

Certification Statement: A certification statement must be submitted with any application in which the owner(s) of the subject property is (are) a limited liability company, corporation, partnership, association, trustee, etc., or if someone other than the owner(s) of record sign(s) the application.

I, _____, in my capacity as _____, hereby
representative/authorized agent/other

certify that _____ is (are) the owner(s) of the property which
name of LLC / corporation / partnership / association / etc.

is the subject of this application and that I am authorized to sign this application on behalf of the owner(s).

Signature: _____ Date: _____

I understand that knowingly providing false information on this application may result in any action taken hereon being declared null and void. I further understand that pursuant to KRS 523.010, et seq. knowingly making a material false statement, or otherwise providing false information with the intent to mislead a public servant in the performance of his/her duty is punishable as a Class B misdemeanor.